TIN tech

Innovation Stage

Executive Summary

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This report is a summary of the Innovation Stage at TINtech 2022 on October 11th which was sponsored by Guidewire and chaired by René Schoenauer, Director, Product Marketing, EMEA at Guidewire, who TIN interviewed prior to authoring the report. René explained that Guidewire chose to sponsor the Innovation Stage because globally they help more than 500 insurers to innovate through new technology, through Guidewire Marketplace, a community and curated collection of proven insuretech solutions, and Vanguards, a new Guidewire initiative designed to help insurers learn about the hottest-new insuretechs which brings together insurers and insuretechs so they can test and learn, experiment and innovate.

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10x Your Results with Less Effort

Clare Knight, CEO, DA-X

The 3 sessions featured presentations on a broad range of topics, with innovation as the 'golden thread'. The focus was not exclusively technology, and the Innovation Stage is very much not an insurtech show and tell. This was typified by the first presentation of the day from Clare Knight, CEO at DA-X (Delegated Authority Exchange). Despite being an entrepreneur at the helm of a newly launched insurtech providing a global end-to-end digital solution for DA that has the potential to revolutionize how delegated insurance is transacted across the world, Clare chose to focus her presentation on 5 tips she took away from a podcast by Greg McKeown that she finds really helpful as an entrepreneur – and none of them had anything to do with either technology or delegated authority.

Number one is leverage, or the difference between linear and residual effort and results. With linear effort/results, you put the effort in once and you get the results once. Residual results are different. You put the effort in once, but the results 'flow through and through and through'.

An example of residual effort is hiring the right people. Clare invited the audience to have a look at things that they are doing and (re)assess the proportion of linear versus residual effort.

The second tip was 'invert': working smart, and inverting the idea that easy is lazy, and 'pace', which is about giving yourself an "upper bound of contribution" - to combat burnout.

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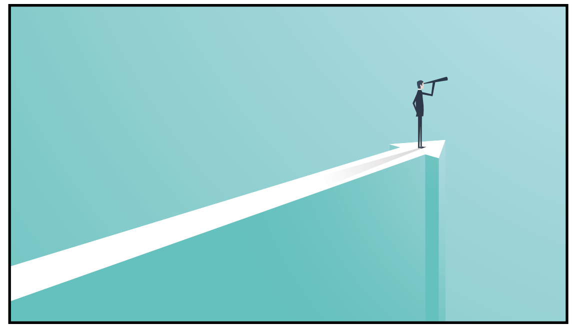
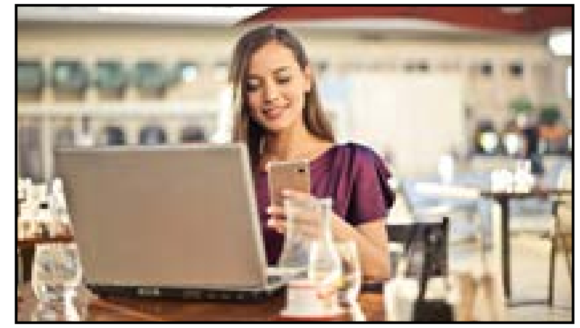


The third was trust, and the importance of hiring people you can trust completely - and then trusting them completely!

Number four was ‘lift’ which Clare described as another word for teach, but where the key is ‘exponential teaching’: where each person you teach shares their learnings with a number of their peers.

The final tip was radical gratitude: “if you focus on what you lack, you’ll lose what you have. If you focus on what you have, you gain what you lack”.

The key learning for Clare from the Greg McKeown podcast was to unlock the relationship between effort and reward – and it sounds like a podcast worth the effort of seeking out.

René Schoenauer highlighted a theme that ran through the day: the role of ‘the human’ as a critical part for innovation – it’s not all about the technology. René agreed that the pandemic, where we had to work virtually via endless zoom meetings, made people realise that burnout is a real threat, and that coming out of the pandemic there is a renewed focus on people, wellbeing, and organisational culture.

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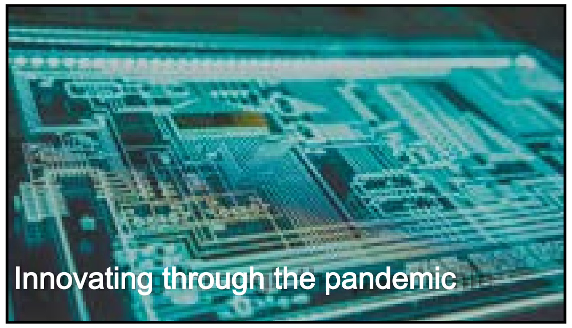

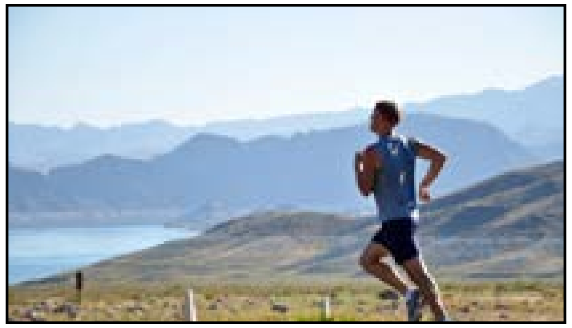

IoT, smart devices and synthetic data models – the next generation of insurance risk modelling

Gemma Whitehouse, Director & CTO, Ingeniva

Gemma talked the audience through some innovations that the pandemic helped catalyse, with a focus on data driven product and service models. Examples she shared included leak detection and fire prevention in Scandinavian log cabins, and a fully remote physiotherapy service which enabled both faster recovery and long-term injury prevention as well as great customer service. As well as improving customer service, these solutions also help reduce claims: by offering these digital first solutions, insurers were able to increase flexibility, deliver services faster, and offer behavioural indicators back to the business that enhance future underwriting and pricing.

A further example was Medit: a software solution for the private health insurance market that essentially digitises the value chain between the insurers, intermediaries and healthcare providers, and is addressing data privacy concerns: data is stored on the customer's device, and it allows the customer to be able to switch their access to that data from whichever provider on and off, opening up the opportunity to broker that data in exchange for access: something that One Creation also enables, as Zohar Hod would explain later in the day.

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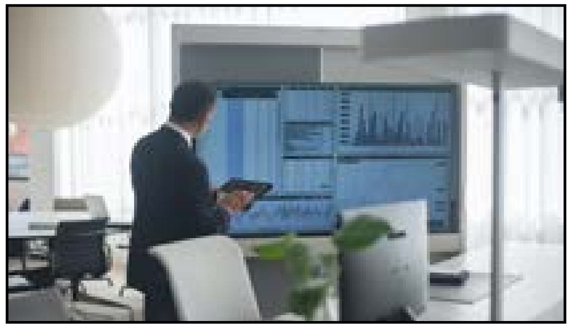

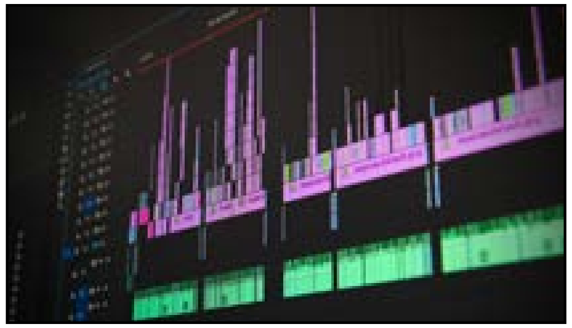


Gemma finished with some thoughts on exploiting synthetic data for data driven underwriting. Synthetic data is data artificially manufactured by algorithms rather than being generated by real world events. By using algorithmically generated data, it's possible to hide the identity of individuals and any sensitive information whilst still allowing the data to be analysed: it has the potential to solve a key problem with new risk products and emerging technologies - lack of data for accurate pricing.

Gemma's presentation featured real use cases that really demonstrated the benefits of technology and data, and how they can improve the customer experience and deliver tangible, quantifiable results, which resonated with René Schoenauer who explained that the Guidewire marketplace features proven insurer tech solutions that have delivered tangible, quantifiable results for Guidewire clients: it is proven technology curated by a dedicated team doing due diligence and quality assurance.

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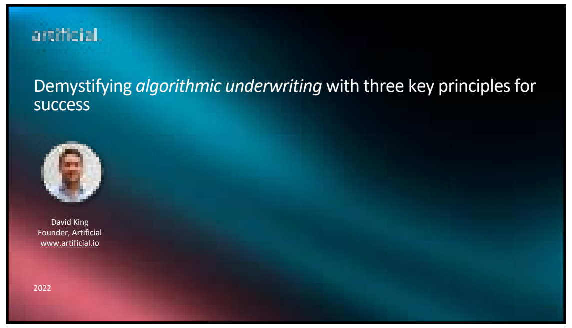

Demystifying algorithmic underwriting with 3 key principles for success

David King, Founder, Artificial Labs

David started with a couple of anecdotal stories to demonstrate the power of machine learning and AI, starting with an account of the computer that was taught how to play the 3000-year-old Chinese game 'Go'. There are more combinations of pieces on a Go board than there are atoms in the known universe, and so many different intricacies and nuances around strategy and different levels of play that most Go players claimed a computer would never beat a human. Then, in October 2015, there was a five nil whitewash where the best Go player in the world was beaten by a (now Google owned) company's algorithm. They then won the Chess World Championships, and defeated Garry Kasparov, who famously said he would never be beaten by a computer. And what was really interesting about that computer winning the World Chess Championship was that the company didn't give it any training data. They just told it the rules and it played itself – and taught itself.

David explained that he has a very similar conversation with a lot of his commercial underwriting partners at Lloyd's and in the London market who are equally convinced they will never "be beaten by a machine", whereas the technology already exists to do just that. However, David went on to stress that this man V machine dichotomy is erroneous, and that the term "bionic underwriter" coined by Paolo Cuomo in the audience, better describes the opportunity: the technology can augment and enable the human, as well as replace or replicate what they do.

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David then gave a quick overview of how Artificial perceive the essence of algorithmic underwriting. A submission is received from any channel, ideally via API but it could be email, PDFs or excels, or via a portal. The submission is broken down into its component parts to make a decision on. The algorithm makes the decision on each part, and then effectively there are three outcomes: Yes, we would like to write this business (this could be 100%, or it could be syndicated business) No, we won't cover this, and thirdly the algorithm will pass the submission on to a human to decide.

David then shared 3 pieces of advice on how to get it right:

- Start at the end: what do you need in order to make a decision?
- Make sure it scales - don't hard code solutions that can't respond to change and don't introduce tomorrow's legacy today
- Humans are still vital

For Rene the key takeaway was the huge opportunity for data in underwriting: not only in personal lines, but in fact especially in complex commercial risk, but also (once again) the importance of the 'human aspect': it's about enabling people to make better decisions through data, and data-driven insights. It's not going to be fully automated, especially in complex commercial risk. In this context Guidewire aim to provide a 'system of insights' rather than simply a system of record: a system that helps underwriters to make the right decisions at the right time through actionable insights that are embedded into operational workflows.

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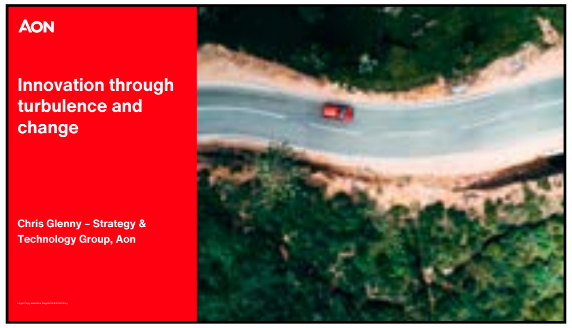

Innovation through turbulence and change

Chris Glenny, Managing Director Strategy & Technology, AON

Chris outlined what he described as ‘the great convergence’. Post-COVID we are now operating in a far more complex environment, and organizations are having to deal with a number of different situations simultaneously.

- Skills Convergence: organizations are suffering from competition for talent from industries they’ve not had to compete with in the past: similar transferable skillsets like data, tech risk and compliance are required across sectors.
- Digital Convergence: changing consumer demands, technological advancements and evolving business models are bringing industries closer together, again resulting in more competition from a broader set of industries. E.g., the Amazon home insurance aggregator.
- Macro-economic climate / labour market: with unemployment at an all-time low, Chris argued that a company’s values and ESG credentials are becoming key components in the fight to attract and retain talent.
- Social & Work Life Convergence: a blurring of personal and professional life boundaries means health and financial wellbeing have become a workplace challenge.
- Geo-political convergence: The safety and wellness of an increasingly connected global workforce is more significantly impacted than before by uncertainty caused by conflict and shifting geo-political landscape: the impact of Ukraine, for example, is felt in supply chains around the world.

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Chris feels all of these different pressures are also huge opportunity for insurance:

- New products that respond to current / evolving needs. Chris gave Intellectual Property as an example: in 1975 18% of the value of the S&P 500 sat in intellectual property. That's now 85%. There's an opportunity to try and help organisations to release the value of intellectual property. Other examples, Chris cited were the opportunity to meet challenges around supply chain, cyber, fuel supply etc (triggered by the war in Ukraine).

- Technology & Data: insurance holds data that can help solve some of society's most pressing challenges. Chris challenged the audience, asking if we are really taking on these big challenges and improving the way that the insurance industry is perceived.

- People: we need to create structures and teams that encourage collaboration and innovation by looking across and outside our organisations.

René enjoyed this presentation because Chris 'flipped', or inverted, what many people see as threats to the sector and presented them as opportunities. For example, we have an opportunity to attract talent from different industries, and to improve our own capabilities within our

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industry (instead of suffering a brain drain to those industries). Chris's message was 'do not be put off by turbulence and change: embrace it and innovate!' Again, he challenged the sector, asking if we are creating the right environment to break down barriers between big organisations and small organisations , and get them working together to enable that innovation to happen.

René's key takeaway from this session was about messaging:

> *"Insurance has a reputation of being a boring industry, but I think exactly the opposite is the case: I think insurers should take the opportunity to explain to people - to talent - how important and how exciting insurance is, and that (as Chris said) insurance holds data that can help solve some of society's most pressing challenges. I think if you get this message out and if you create awareness about the role and the importance of the insurance industry, it could be a game changer in attracting talent to insurance, especially in complex and commercial and speciality risk."*

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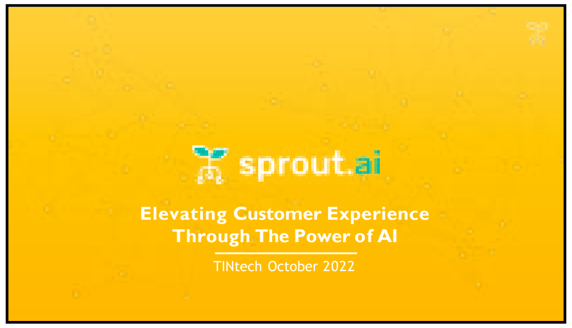

Elevating Customer Experience through the power of AI.

Roi Amir, CEO, Sprout A.I

The second session focussed on AI, the Metaverse and the purpose of insurance, and started with a presentation from Roi Amir, CEO at Sprout AI on elevating customer experience through the power of AI. Historically, claims has been viewed as an area which is difficult to transform whilst retaining the necessary empathy and risk mitigation because manual processes, opaque decision-making philosophies, and antiquated systems are too pervasive. Roi explained that claims process automation has been held back by:

- Extraction of Unstructured data
- Complexity and volume of data in decision making
- Legacy systems and processes

Sprout's mission is to help insurers focus on delivering an exceptional customer experience in claims. They are able to bring insights into unstructured claims data, integrate seamlessly into legacy systems, and deploy quickly and with low data privacy risks thanks to the application of synthetic data (see above!).

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At a top 5 UK GI insurer, they have enabled automatic recommendations allowing 45% of claims settlements to be done in real time, with a 10% increase in claims settled within the first five days and a +25% TNPS increase for customers receiving faster settlement times. They were able to achieve 98% accuracy, and for fraud to be automatically assessed so genuine claims are not held up. All of this whilst also significantly reducing claims leakage across the portfolio.

For René a key takeaway was that AI can enable the transparency the customer is looking for

> *"so if you make a decision, especially if the customer might not like the decision because you're refusing the claim, then at least there should be transparency, and there's an opportunity for automation and AI to make these decisions more transparent and more understandable to the customer".*

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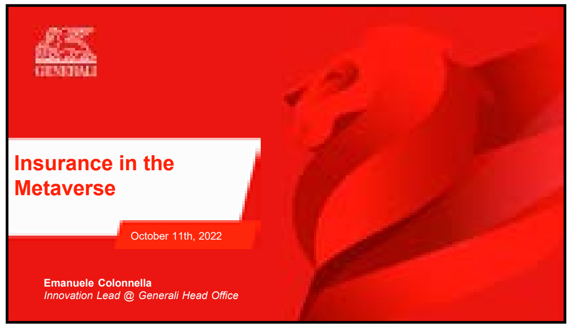

Insurance in the metaverse – improving operations, products and service

Emanuele Colonnella, Innovations Manager, Generali

Roi was followed by Emanuele Colonnella, Innovations Manager at Generali, who gave a whistle stop tour of insurance in the metaverse, and the opportunities it could present for improving operations, products and service.

Emanuele defined the metaverse as a series of immersive 3D digital worlds that exist in the cloud where people and businesses can connect, interact and transact. The opportunities for insurance include:

- Branding & advertising: many big players are establishing a presence, and some are already using the metaverse as a new channel for attracting digitally savvy talent.
- The metaverse enables social interactions and features enhanced collaboration tools that can be used for virtual training and onboarding.
- In terms of products and services, there are opportunities in the metaverse for property, BI, Life & Health products as well as protection services.

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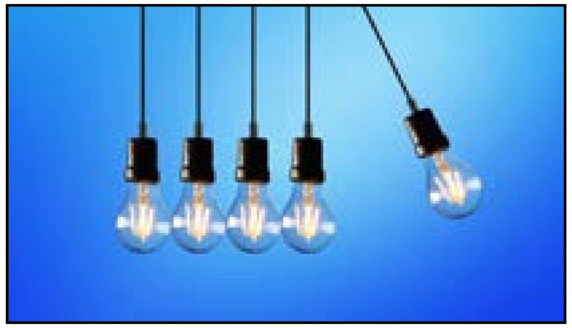
- The metaverse can also enable improved operations in areas like client onboarding, claims management and through leveraging digital twins.

- Finally, the metaverse represents a new and alternative set of asset classes. Emanuele gave tokenisation as an example.

In terms of threats, Emanuele mentioned new risks/forms of insurance (which of course also represent an opportunity), the potential emergence of mutual / decentralised business models in the metaverse and new, but as yet unknown social issues that could disrupt the centre.

The metaverse is new, it is emerging, and a lot of organisations in other sectors are investing a lot of time and money in establishing a presence: insurance should be no exception.



Insurtechs and beyond: where next for the Lloyd's Lab?

Iryna Chekanava, Senior Manager, Innovation & Partnerships, Lloyd's Lab

Iryna Chekanava gave the audience an insight into what the Lloyd's Lab current activity and other initiatives under the Lloyd's innovation umbrella.

The primary goal of the of the Lab is to help accelerate innovation in the market and to grow the written premium in the corporation.

There are four main initiatives:

1. The Lloyd's Lab cohort is at the core of what is known in the Lloyd's lab, and is very much about product innovation and development. The Lloyd's lab ten-week accelerator program helps incubate ideas with market participants. There are lots of excellent businesses with very good data and modelling propositions and innovative technology products that find it challenging to break into the insurance market, with Lloyd's often even more challenging. The program provides an opportunity for these companies to work with a panel of mentors from across the industry, including brokers, insurers and risk managers, to define a minimum viable product.

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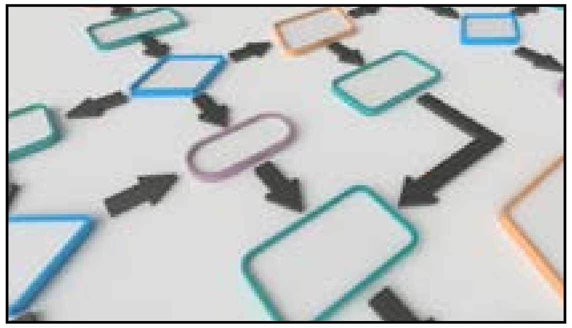


2. The Lloyd's product launch pad is a lesser-known initiative. It is a platform and forum where new ideas and businesses can get exposure in front of 33 managing agents to receive capacity from the market for their products. Following the Lloyd's lab and product concept development process, companies need to find capacity, and this is the panel where they can get a good understanding of who they are selling to and what the market size might be.

3. Future Minds. The program focused on fostering skills among the young professionals of the Lloyd's Market Participants. It's an eight-week program targeted specifically at young professionals who work with a product innovation consultancy to take an idea and work it through to develop a minimum viable product or concept. At the end there's a Dragon's Den style event where they present their concept to a panel of insurers and have it validated.

4. The Operations Innovation Facility (OIF) is focused on sustaining incremental innovation initiatives across Lloyd's.

The Lloyd's Lab fosters innovation by putting insurtechs in front of the big insurers, and also reciprocally lets the big insurers learn about how products are being developed within insurtechs. They aim to build new skills and capabilities in the market, matching customer demands with solutions and augmenting market capabilities to develop new products and solutions. It is about creating the frameworks which help insurers to think about product development in agile and lean terms, and providing a proactive hub to help solve complex challenges and tackle emerging risks.

For Rene the Lloyd's lab presentation demonstrates that technology innovation is possible in a very complex and specialist insurance market and was indicative of a mindset shift and a new, more open and more pragmatic approach to the market that the market is responding really well to. Also, it demonstrated that they recognise that innovation is required and as an organisation Lloyd's is prepared to incubate it and invest in it to help make it happen.

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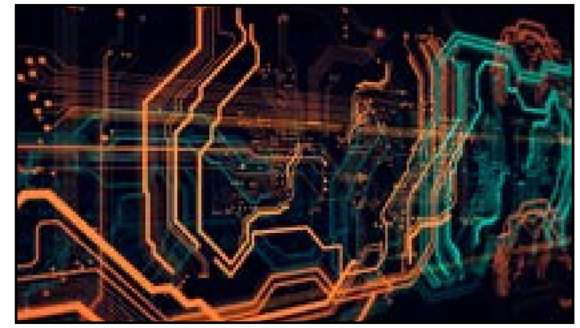


Blockchain technology for greater privacy and data control

Zohar Hod, Chief Executive Officer, One Creation (Online Live)

The story of one creation starts with Zohar's son, who at the age of 11 was diagnosed with type one diabetes. Straight after coming back from the hospital for the first time, they were bombarded with advertising from medical device companies and other companies promoting services relevant to his medical condition (including insurance). Zohar decided to do something about this by building One Creation.

As consumers, most of us have no idea what's done with our data after we 'press consent'. We've "capitulated to the social dilemma" (to quote Zohar) and don't realise that there can be between 6 and 200 different trackers tracking our every move online. Consequently, the regulators are coming down hard on data sovereignty and giving more and more sovereignty to the individual. Cf the digital acts in Europe and the UK.

Zohar argues that we need to change the relationship between organisations and the individuals in terms of their data: the example he gave was a marketing department charged with bringing in business insights and providing added value services. To do that they often partner – in Zohar's example an insurer partnering with a supermarket provide lower premiums and better suggestions around health - but the CISO of the organization will be concerned about the liability related to sharing data and to providing these added value services.

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One Creation provides a technological solution that sits between the data already collected in the form of a general consent, and partners - and allows campaigns to be sent (via mobile and other channels) to the customer. The system delegates control of the data by asking the customer for informed consent for each campaign (rather than a general consent). That informed consent will then be enforced downstream: if a partner or campaign wants to use that data, the system enforces the consent. From the customer's perspective, they have control over their data. They are very clearly informed what data is being share with who, what is being done with the data, and most importantly, for how long. And after three months (for example) One Creation will then self-destruct the data. One Creation also allows the organization to reward the customer for informed consent with a trust token that can be converted to loyalty programs or other benefits.

The system thereby gives the organization the ability to gain first hand business insights and the customer benefits in terms of control and traceability of where their data is (and even rewards in return for their informed consent). Importantly, trust is also being engendered between customer and insurer, where currently all too often there is suspicion: it's a winwin situation.

René picked out the fact that One Creation gave the individual control of their data and therefore fosters trust:

> *"By enabling visibility and transparency around what is happening to customer data you open a lot of opportunities for new insurance models as well as more personalised products...and overcome concerns about privacy and replace them with incentives for people to share their data".*

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Trust, engagement and innovation: 3 ways open finance could transform insurance

Chris Noakes, Head of Product – Open Banking, Eliga

Chris Noakes of Eliga kept the focus on data in his presentation on open finance, which will mean more customer data points, especially financial data, being made available to insurers: data around pensions, investments, mortgages as well as other insurance products. The customer will be in control of who has their data, what data they have access to, and for what purpose, but (with the necessary consents) insurers will have access to much richer and more varied customer financial data and therefore insights, allowing for enhanced customer experience and innovation in product development and cover.

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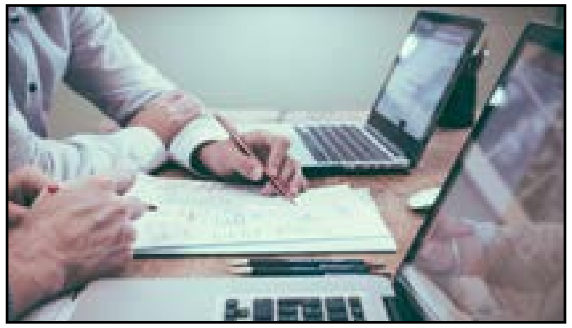


Chris focused on 3 key benefits of open finance for insurance: **trust**, **engagement**, and **innovation**.

Gaining trust starts with delivering what's right for the customer, delivering on that promise and delivering it consistently. Open finance and open insurance have the potential to enable a new relationship between insurer and customer focused on the value exchange when a customer consents to access to their data: by being upfront and transparent about the information they are gathering, what they're going to use it for and demonstrating that value, insurers can build trust with the insured: its important the customer can 'see what's in it for them'.

In general insurance, engagement is traditionally focussed around either new business/onboarding, mid-term adjustments, claims or renewal, and it's quite transactional. Open finance has the ability to change that by transforming how customer data is leveraged and the value exchange.

Finally, innovation: through consenting to access to their data, customers can allow insurers to build and tailor products for them, and provide cover that flexes throughout the life cycle, and proactively protects them: cover has the potential to become a personal experience, rather than a transactional one.

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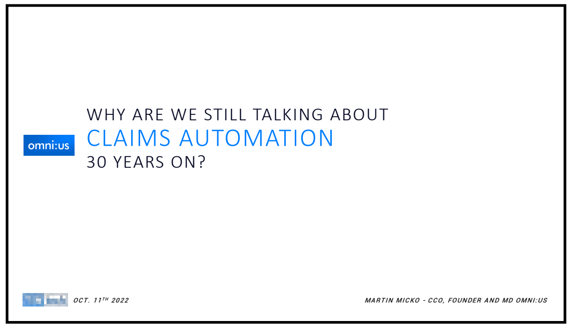

Why are we still talking about claims automation 30 years on?

Martin Micko, Managing Director, Omni:us

Martin explored some of the reasons claims automation is 'ongoing', and started with the assertion that claims and IT are two "very, very different animals": Martin's assertion was that claims people don't necessarily understand technology, and IT people rarely grasp what claims is really about or how can they bring value to claims, which is not a very fertile ground for innovation.

Reason number two is silos. In the 80s and 90s, companies started "building walls" between different departments because they broke down the policy lifecycle into discreet stages that they sought to digitise independently of one another, and those 'walls' persist today between (quoting Martin's example) intake and claims, but also between claims, TPAs and others.

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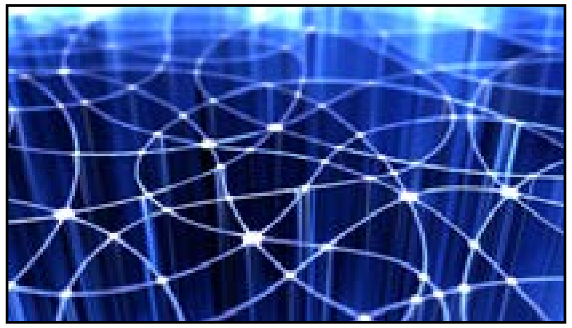


Martin then outlined what he sees as three key aspects of claims automation in the next 12 to 18 months:

1. AI has reached the point where it can take cognitive decisions along the entire claims management process, and straight through processing without any human intervention is now a reality.

2. The emergence of products and services that combine domain knowledge and expertise with AI technology – technology is now enabling product development rather than limiting it.

3. Organisations will have to transform not just their technology, but also their processes, people and culture, and reappraise the roles of various parties in the value chain (including internal departments but also TPAs and offshore service centres).

Martin was asked about what levels of straight through claims processing Omni:us is enabling in different markets, and explained that in property & casualty / high volume low severity claims they typically see straight through processing rates of 50 - 55%, and then above that there's 30 - 35%, which is semi-automated (which means that the claim is pre-processed / pre-prepared and a specific decision or recommendation is presented to the claims adjuster and the rest of the claim is still automated). Taken together this means 50 to 70% of the work is automated, with a remainder of 10 to 15% that are manually processed because of complexity, governance or other factors.

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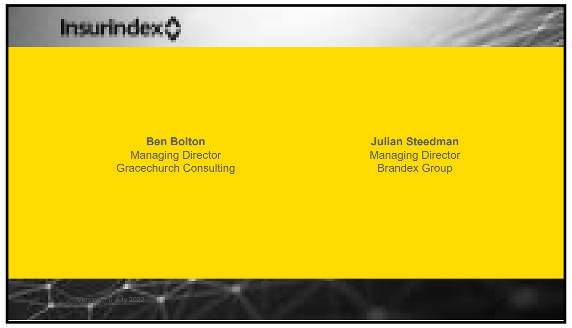

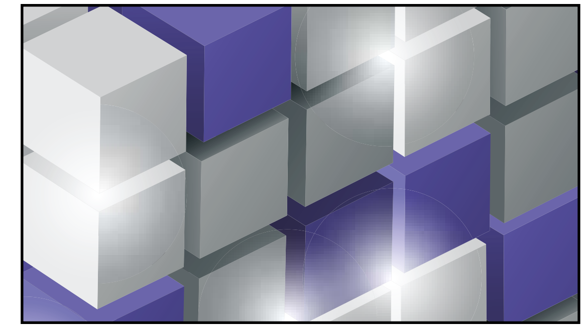

The coolest brands in insurance and why it matters

Julian Steedman, Managing Director & Chairman, Brandex Group & Ben Bolton, Managing Director & Founder, Gracechurch Consulting

Gracechurch Consulting has been researching the commercial insurance market for 20 years and has over 25 insurers as clients, and Brandex Group, who have been working with insurance brands for over 30 years, have set up a joint venture called InsurIndex to raise the profile of brand measurement and brand tracking, and prove the correlation between business success and investing in brand.

Ben was keen to emphasise the difference between sales activation and brand. Sales, or sales activation is the focus for most companies because "it's what most CFOs want to see": an immediate return on the investment. Hence, much activity that supposedly relates to brand is about sales activation. InsurIndex did some correlation work with ICMR which showed a very close correlation between GWP growth of carriers and brands as they develop, demonstrating that if you get your brand right, you get your growth right:

- Building brand recognition takes much longer than destroying a brand – and the sector has seen some illustrative recent examples of the latter.
- Deteriorating brand recognition can be a leading indicator of losing business in the following years.
- Brand recognition can be volatile if there is no consistency and clarity of business philosophy 'lived throughout the organisation.'

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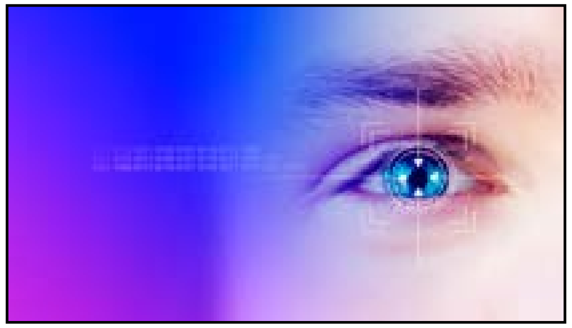


According to Insurindex, the five leading London market brands at the moment are Beazley, Chubb, Munich Re, AXA XL and Liberty (in that order) and it is no coincidence that all are well invested brands and their size, scale and growth has matched their brand investment.

Julian shared the case study of Apple to illustrate the importance of focusing on customer benefit in branding.

> *"You can't start with the technology and try to figure out where you're going to try to sell it. A vision for Apple started with: what incredible benefits can we give to the customer? Where can we take the customer?"*
>
> \- Steve Jobs, CEO, Apple, 2000-11

In the early 2000s, Apple had a meagre 5% share of a very crowded market dominated by their main competitor Microsoft. In 2001 they launched an ad campaign that highlighted the customer benefits of Apple and identified and underscored the "chinks in the armour" of Microsoft. They created an incredibly successful series of 66 ads that each highlighted a benefit of Apple / iPhone technology and played on a weakness of PCs. Apple were thinking long term brand investment, understood their audience and their competitors and the power of brand and product positioning.

Innovation Stage




To close, Julian shared some key learnings around brand investment (some for tech firms as well as insurers):

- Think differently to create demand, and focus on customer benefit over the features of your product or service.
- Be clear about your target segment(s), the specific opportunities and the benefits of your brand for each.
- Speak English and not IT - a lot of people that buy technology aren't necessarily technologists.
- What's your big idea and how do you tell that story? Buyers of technology in the insurance market now, they want to understand more than just the product. What's the company ethos? Where are you going? What's the proposition? What do you stand for?
- Clients don't just want to understand your product(s), they want to understand your business, your culture and where you are heading.

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René Schoenauer's summing up reflected the audience's appreciation of the mix of topics. The speakers didn't just focus on the technology, but also considered broader issues in the world we're living in today, the macro-economic changes that nobody foresaw, and underscored the fact that people and culture are as essential to enabling innovation as technology.

The Insurance Network would like to thank Guidewire for sponsoring the Innovation Stage at this year's TINtech, René Schoenauer for chairing the sessions and contributing to this report, all our speakers for their insights, and finally everyone in the audience for their questions. The Innovation Stage returns at TINtech London Market on February 7th. See you there.

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